PTO/SB/05 (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

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## UTILITY **PATENT APPLICATION TRANSMITTAL**

(Only for new non provisional applications under 37 C.F.R. § m1.53(b))

Attorney Docket No.		467-B04.US		
First Inventor		Dominic THERIAULT		
Title	CONTAINER PACKING SYSTEM			
Expres	ss Mail Label No.			

See MPEP chap	APPLICATION ELEMENTS of the following utility patent application contents.		ASSISTANT Commissioner for Patents Box Patent Application Washington DC, 20231				
1. See Transport of Submit and See 37  2. Specific (preferred of Coross of State)  - Cross of State) - Referred or a coro of See See See See See See See See See Se	ansmittal Form (e.g., PTO/SB/17 original and a duplicate for fee processing) ant claims small entity status.	7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)  8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)  a. Computer Readable Copy  b. Specification Sequence Listing on:  i. CD-ROM or CD-R (2 copies); or  ii. paper  c. Statement verifying identity of above copies  ACCOMPANYING APPLICATION PARTS  9. Assignment Papers (cover sheet & document(s))  10. 37 CFR 3.73(b) Statement Power of Attorney					
- Claim		11.	(when there is an assignee)  English Translation Document (if applicable)				
4. ☑ Drawin 5. Oath or Dec a. ☑ Newl b. ☐ Copy (for c i. ☐ 6. ☐ Applica  18. If a CONTIN ☐ Continu Prior applica  For CONTINUATION Box 5b, is consider	Independent of the disclosure of the accompanying control of the disclosure of the apart of the disclosure of the accompanying control of the disclosure of the accompanying control of the prior application. The companying control of the accompanying control of the accompanying control of the accompanying control of the disclosure of th	part ( the pr	equisite information below and in a preliminary amendment:  CIP) of prior application No: /  Group / Art Unit:				
The incorporation <u>c</u>	an only be relied upon when a portion has been Inadv  19. CORRESPO	NDE	NCE ADDRESS				
Customer N	lumber or Bar Code Label (Insert Customer No. o	r Attach	bar code label here) or Correspondence address below				
Name	Dominic THERIAULT						
Address c/o PROTECTIONS EQUINOX INT'I		'L IN	IC.				
City	Montreal	Sta	ate QBC Zip Code H4N 2R1				
		eleph	(-14) 4424				
Name (Print/Type	Dominic THEDIAIII T		Registration No. (Attorney/Agent)  Date Sept. 3 2003				

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will Englepending upon the needs of the Individual case. Any comments on the amount of time your are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

PTO/SB/17 (01-03)

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Complete if Known						
Application Number						
Filing Date						
First Named Inventor	Dominic THERIAULT					
Examiner Name						
Group / Art Unit						
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10111 2005				First Na	First Named Inventor			Dominic THERIAULT		
					Examir	Examiner Name				
Patent fees are subject to annual revision.					Group	Group / Art Unit				
TOTAL AMOUNT OF PAYMENT (\$) 474. 9					Attorne	y Docke	t No.		467-B04.US	
METHOD OF PAYMENT (check one)							F	EE C	ALCULATION (continued)	
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Nu	count mber		_		1051	130	2051	65	Surcharge-late filing fee or oath	
Acc					1052	50	2052	25	Surcharge-late provisional filing fee or cover sheet	
N:	ame T	L			1053	130	1053	130	Non-English specification	
	Char Und	ge Any Add er 37 CFR 1	itional Fe .16 and	ee Required 1.17	1000	150	1000	100		
×		cant claims		tity status.	1812	2,520	1812	2,520	For filing a request for ex parte reexamination	
[77]		37 CFR 1.2		·	1804	920*	1804	920*	Requesting publication of SIR prior to	
2.	Paym	ent Encl		·	1805	1,840*	1805	1 840*	Examiner action Requesting publication of SIR after	
🔲	Check	× c	redit c	ard L Money Order L Other	1003	1,040	1000	1,010	Examiner action	
			_	CALCULATION	1251	110	2251	55	Extension for reply within first month	
		FILING			1252	410	2252	205	Extension for reply within second month	
Large Fee		Small   Fee	Entity	Fee Description	1253	930	2253	465	Extension for reply within third month	
Code		Code		Fee Paid	_	4.460	2254	725	Extension for reply within fourth month	
	750 330		375 165	Utility filing fee 375.00 Design filing fee	1254	1,450	2254	123	extension for reply within fourth month	
1003	520	2003	260	Plant filing fee	1255	1,970	2255	985	Extension for reply within fifth month	<u> </u>
	750 160	2004 2005	375 80	Reissue filing fee Provisional filing fee	1401	320	2401	160	Notice of Appeal	
				SUBTOTAL (1) (\$) 375.00	·1402	320	2402	160	Filing a brief in support of an appeal	
					1403	280	2403	140	Request for oral hearing	
2. Cl	AIM	S		Fee from	1451	1,510	1451	1,510	Petition to institute a public use proceeding	
				Extra below Fee Pa	aid <sub>1452</sub>	110	2452	55	Petition to revive – unavoidable	
Total C	laims		31	-20**= 11 x 9 = 99:	1453	1,300	2453	650	Petition to revive – unintentional	
Indepe		Claims	2	- 3**= X =	1501	1,300	2501	650	Utility issue fee (or reissue)	
•		endent C	laims	x =	1502	470	2502	235	Design issue fee	
					1503	630	2503	315	Plant issue fee	
Large E	_	Small En		Fee Description	1460	130	1460	130	Petitions to the Commissioner	
re		Fee		. 55 2 500 раз	1807	50	1807	50	Processing fee for provisional applications	
Code	(\$)	Code	(\$)	Oleima in guarda of 20	1807		1806	180	Submission of Information Disclosure Stmt	
1202	18_	2202	9	Claims in excess of 20					Recording each patent assignment per	
1201	84	2201	42	Independent claims in excess of 3	8021	40	8021	40	property (times number of properties) Filing a submission after final rejection (37	
1203	280	2203	140	Multiple dependent claim  **Reissue independent claims over original	1809	750	2809	375	CFR 1.129(a)) For each additional invention to be	
1204	84	2204	42	patent	1810	750	2810	375	examined (37 CFR 1.129(b))	
1205	18	2205	9	**Reissue claims in excess of 20 and over original patent	1801	750	2801	375		
				SUBTOTAL (2) (\$) 99.00	1802	900	1802	900	Request for expedited examination of a design application	
30Β101AL (2) (φ) 33							design approaction			
**0	**or number previously paid, if greater; For Reissues, see above									
		•		<u>.</u>					Fee Paid SUBTOTAL (3)	(\$)
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١	SUBMITTED BY			Complete (if applicable)
	Name (Print Type)	Degminic THERIAULT		, Reg. Number
	Signature(s)	James Marth	Date <u>Sept. 3</u> /20	Deposit Account User ID